Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

Energy, Minerals and Natural Resources Department \

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Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Ariesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 Santa Fe, New Mexico 87504-2088

	REQUEST FOR	ALLOWAB SPORT OIL							
Operator		Well Al							
21ST CENTURY INVES		375	70		30-	-045-113	888		
	Prod. Corp. irmington, New	Mexico 87	40].						
Reason(s) for Filing (Check proper box)	Change in Tras	sporter of:		r (Please explai		Continu	Tarrage	nont Co	
New Well Li Recompletion	Oil Dry	• —		Address 5 E. 27t					
Change in Operator	Casinghead Gas Cor	_	<u> </u>						
of change of operator give name Grand address of previous operator	Resources, In	c. 2250 E	Cast 73r	d St., S	uite 40	0 Tuls	a, OK	74136	
I. DESCRIPTION OF WELL	AND LEASE \O	27410	102	7430) 10	7H20			
Lease Name	Well No. Poo				Lease No. lederal or Fee 14-20-603-584				
Navajo 15049	<u> </u>				1	Indian			
Unit LetterA	: Fee	I From The	orth ⊔∞	and33	30 Fo	ct From The _	East	Line	
Section 23 Township	32N _{Rai}	nge 18	M, M	ирм <u>,</u> 5	San Juan	n		County	
III. DESIGNATION OF TRANS	SPORTER OF OIL	AND NATU	RAL GAS						
· 12.1			Address (Give address to which approved copy of this form is to be sent)						
Giant Refining Company Name of Authorized Transporter of Casinghead Gas or Dry Gas			P.O. Box 256 Farmington, New Mexico 87499 Address (Give address to which approved copy of this form is to be sent)						
7.41.2 00 7.64.10.1.20			·						
If well produces oil or liquids, give location of tanks. SE/4	Unit Sec. Tw SE/4 14 3	p. Rgc. 2N 18W	وللعلصد عجو عا	connected?	Whea	7			
If this production is commingled with that I	rom any other lease or pool	, give commingli	ng order numb	жг					
IV. COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Decpen	Plug Back	Same Rea'v	Dill Res'v	
Designate Type of Completion	- (X)	<u>i</u>		L	L	i	L		
Date Spudded	Date Compl. Ready to Pro	x1.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations			<u> </u>			Depth Casing Shoe			
	TIRING C	A SINC A ND	CEMENTI	NG RECOR	D	1			
HOLE SIZE	CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET			SACKS CEMENT .			
			<u> </u>			-			
V. TEST DATA AND REQUES OIL WELL (Test must be after r	TFOR ALLOWAB recovery of total volume of t	LE	be equal to or	exceed too allo	awable for th	is depth or he	for full 24 hos	ws.)	
Date First New Oil Run To Tank	Date of Test	COU OR GIVE I		ethod (Flow, pi					
	,							7 1	
Length of Test	Tubing Pressure		Casing Pressure			Lione-Sine			
Actual Prod. During Test	Oil - Bbis.		Water - Bbls.			с -NGAS S 1883			
GAS WELL				· · · · · · · · · · · · · · · · · · ·		OIL C	ON. D)IV.	
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF			Gravity DISTERS				
Testing Method (puor, back pr.)	Tubing Pressure (Shul-in)		Casing Pressure (Shut-in)			Choke Size			
TIT OPEN TOO CEDITIES	NAME OF COLOR	LANCE	-\r						
VI. OPERATOR CERTIFIC I hereby certify that the rules and regu				OIL COI	USERV	'ATION	DIVISION	NC	
Division have been complied with and that the information given above						OV 2 2 1993			
is true and complete to the best of my knowledge and belief. FOR: 21ST CENTURY INVESTMENT COMPANY				Date Approved					
Paul C. Thompson				7110					
				By Shang					
Printed Name Title				SUPERVISOR DISTRICT #8					
11/16/93 Dute		7-4092 ione No.					·		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.